

Public Relations in Public Health*

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PUBLIC health is big business. Federal, state, and local governments expend through health departments almost 400 million dollars¹ annually for this important commodity. Public health is one of government's most important businesses, in that it not only promotes and maintains within a nation a high standard of living, but assures the nation a people who are vigorous, active, and physically prepared to meet national emergencies. The health enjoyed by our civilian population determines the physical fitness of our military forces. Without good health no nation may expect to survive either in peace or war.

That civilizations have fallen in the past because of poor health has been often and well demonstrated; for example, the devastating effects of malaria upon the golden era of Greece; the pernicious destruction wrought by malaria, typhoid fever, and smallpox which hastened the fall of the Roman Empire; or, finally, the hastened collapse of the Italian and African fronts through the crippling effects of disease in the last World War. That the eradication and suppression of such scourges is not alone the result of public health practice is common knowledge; but it is a fact that, through the application and extension of public health measures, nations have experienced tremendous improvement in the health of their civilian and military populations.

While past experiences have shown that efforts of health departments alone cannot prevent disabilities and illness, it is nevertheless true that adequately staffed health departments, working in coöperation with the medical profession, hospitals, and other community resources, can do much to maintain good health and keep to a minimum unnecessary illness, disability, and deaths.

THE ROLE OF PUBLIC RELATIONS

The attainment of the objectives of any program can be hastened by the employment of a continuing, good public relations program. Certainly, government's investment in the work of a health department deserves a critical analysis of the techniques which that health department employs in enabling people to attain and maintain optimal health through the prevention of unnecessary disability and sickness, the prolongation of life and the development of a sense of physical, mental, and social well-being.

In the attainment of these objectives, public relations can play a most important part, provided it is based on a well organized plan implemented with careful thoughtfulness by the entire staff of the department. In this respect, public relations may be considered as a science through which an organization may discharge its obligations in a manner which secures that public recognition and approval which is necessary to success.

A program of public relations involves many facets. It is more than health

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education. It covers, in fact, all of the relations which the department's staff has with the public from a telephone message or a letter, to the nurse's visit, the sanitary inspection, the investigation of a complaint, the examination of the school child, or the immunization of a baby—all of which are daily opportunities for health workers to win public understanding and support of the department's health program.

Recent years have brought vast changes in the social and economic structure of the nation; progress in medical science has caused attendant changes in health programs. New public health laws have brought new services and responsibilities to state and local health departments.² This rapid expansion, however, has not at all times occurred as a part of well considered or carefully integrated community health programs, nor has public understanding in all instances kept pace with this expansion. The health department must accept its portion of the responsibility for this failure. It is not only the health department's function, but a prerequisite to the success of its programs, that it evaluate, assimilate, and guide public opinion. By so doing any program which it initiates will not only reach, but become a part of the community. Each health department employee must realize that good public relations are involved in all aspects of his work.

PUBLIC RELATIONS METHODS

The use of public relations as a descriptive term becomes at times, vague and misleading. Its objectives may be divided into several categories: (1) the internal relations within a department; (2) the dissemination of information or health education; (3) community organization; (4) professional relations; and (5) governmental relations with other agencies of local, state, and federal government.

The tools of the science of public re-

lations are many, and in general the health officer is oftentimes startled by the plethora of media available: radio, newspapers, movie films, lantern slides, television, letters, telephone calls, personal visits, exhibits, talks, personal appearances, and last but certainly not least, pamphlets and annual reports. These and many other tools are available to each of the staff for the formulation of public opinion leading to the creation of a demand for health services. An appreciation of the need for health services on the part of the public must be followed by their continued use of these services. Only in this way can the health department succeed in establishing the utilization of health services and, in the final analysis, receive the necessary support for increased health appropriations and improvement in salaries, equipment, and physical facilities so urgently required by many health departments.

INTERNAL RELATIONS

Public relations, like charity, begin in the home. A health department must, therefore, establish a well formulated internal relations program for the improvement and strengthening of personnel relationships. To maintain the acceptance and understanding of all members of the "inner circle" or departmental staff is a prerequisite to the department's successful liaison with outside groups. Serious consideration must be given to the employee's concept of the fairness, understanding, courtesy and kindness extended to him by the department, as well as to his reaction to the physical plant in which he works. Staff integration is all important. The busy atmosphere attendant upon good staff morale creates within the department an environment into which the outsider may enter with pleasure and confidence.

An awareness on the part of each employee of his department's objectives and services must be developed. While

the health officer is the key in all health department programs, the public relations program is not his field exclusively. The health officer may set the pace and policies and determine the plans for a public relations program, but to make it effective his entire staff from the chairman of the board to the humblest clerk must have a thorough knowledge and appreciation of the work, objectives, plans, policies and hopes of the department.

Since every contact of a health department employee is an opportunity for the development of good community relations, it is urgent that a proper in-service training program be developed for the instruction of personnel. Such a program should include a series of lectures, or talks, or informal seminars given by persons skilled in public relations, health education, and the humanities. A manual of procedures³ should be developed which should include simple duties such as proper telephone deportment, correspondence standards, the management of visitors, home visits, and other everyday activities of each of the various professional and clerical staff members. The truly great opportunity to improve public relations lies in this effective utilization of the numerous and varied contacts of the staff. This can be far more effective and infinitely less expensive than any large-scale promotional or publicity campaign.

Through regular staff meetings the objectives, plans, policies and procedures of the health department should be carefully analyzed and evaluated. Such conferences offer to staff members an excellent opportunity to become acquainted with the programs and activities of fellow workers and thus bring about a deeper understanding and appreciation of the work carried on in other fields of activity—a reciprocal internal support which is the keystone of not only good public relations but also of a good public health program.

HEALTH INFORMATION

The dissemination of information, through departmental publications, constitutes an important segment of a health department's total public relations program. The use and abuse of a few of these publications may serve to illustrate the methods whereby success or failure may be realized.

All health officers receive the annual reports and pamphlets of other health departments. Few publications, unfortunately, are of interest. As these reports do not appeal to the health officer, it is reasonable to assume that they will not be read by the layman. In the final analysis, the function of an annual report is not to record but to inform. Bulky volumes of statistical analyses, prefaced by long narratives and printed in small type upon a poor grade of paper, quickly find a place in the "circular file." The annual report should be a report to the employer—the public. Printed on good quality paper, in color, well illustrated and in large print, it should present only the highlights, the objectives, and the recommendations for future action.⁴ Above all, it should be interesting. It has been said that there are no dull subjects, but only dull writers.

Pamphlets too often are a waste of money and effort. Printed on newsprint, with very small type and without color or illustrations, their very appearance too often discourages the reader from investigating the content. A pamphlet should be short, its message simple, couched in basic English, and presented in a form which will be inviting. This again requires good illustrating, color, large print, brevity, and paper of good quality.

Newspaper releases, an important public relations medium, may be either an excellent method of creating or destroying good public opinion. If poor in character, a news release may receive a bad press, no press at all, or so antago-

nize the press that it creates a poor public opinion of the work and services offered by the health department. Above all, a newspaper release must have news value; it must be truthful and so written that technical language and statistical reports are transformed into a message which skillfully informs and at the same time maintains the interest of the general public. Although newspaper publicity may be considered vital to a health department in order that it keep its purposes and objectives in the public consciousness, its use should not be permitted to dominate the total public relations program. "Emphasis," it is said, "is too frequently placed on the tools of publicity rather than the skill with which they are utilized."

COMMUNITY ORGANIZATION

It is not enough for a department to have vague plans for the improvement of the health of the community; it is not enough, for example, to plan to improve immunization against diphtheria. Plans for new or expanded services must be definitive in time, in place, and in quantity of work to be accomplished; they must be definitive in the quality of services rendered. These objectives can be crystallized only after a careful study of community needs and of the acceptability of programs by the people served⁵; they must be based upon an objective analysis made in coöperation with other voluntary and official agencies.

The public demand and utilization of a health department's services determine the success of health programs. To be efficient, these services must be coördinated with those of other agencies. This means that the community relations program of a health department must reach the public, the healing arts professions, and other official and voluntary health and social agencies. The health officer in working with such groups must clearly define the department's objec-

tives in order to foster the coöperative development of public support. People must not only know what is necessary for the maintenance of their health, but they must also be made aware of the services available to them through the health department and other community health agencies. They must know the what, where, how, and when of obtaining the services, and, finally, must be motivated to demand them.

"Submerged leadership" of the health officer within community organizations, such as health councils or health divisions of councils of social agencies, will successfully coördinate community health programs. That is, he provides the necessary guidance, advice, and support to interested citizens and agency workers in the development of health programs, and he allows the credit for implementing such measures to be enjoyed by them directly. "Credit," it has been said, "is like a bacterial colony, the more you divide it the more there is." After all, the health officer has attained his objective if civic leaders speak of "our" health program. A community health council can be a health department's watch dog. It may be its staunchest friend; and support the health officer's efforts in a way which will never subject the health officer to criticism that he may be seeking either more authority or a better salary.

Important objectives as, for example, increases in departmental budgets or the passage of legislation are far more readily realized when supported by an interested citizenry. However, the mere passage of a public health law does not bring about the success of any program. As Abraham Lincoln pointed out, it is "the acceptance on the part of the people or the public opinion behind a law which makes its enforcement and execution possible or impossible."

PROFESSIONAL RELATIONSHIPS

The practising physician is the most

important dispenser of preventive medical services, and it is urgent that cordial relationships be maintained between the medical profession and the health department.⁶ Unfortunately, in some areas this condition does not exist. The health department may be entirely dominated by the medical society or the society may resent the intrusion of public health programs into their spheres of activity. If a health officer desires to have his program understood and endorsed by the professions, he must present it in a forthright manner. However, a cordial liaison with a professional group does not imply that the program need be directed by them but rather that their endorsement, assistance, and support is necessary to success. To improve friendly relations, members of the staff of the health department should be urged to maintain active membership in their professional societies. This includes attendance at professional meetings, participation in their programs and work on the various organizational and scientific committees. The health officer or public health nurse who avoids active membership in his or her professional society is failing in responsibility to the department as well as the profession and does not assist the department in obtaining the necessary support and understanding of its program.

Technical advisory committees should be organized and should meet periodically. Their purpose is to give advice and, conversely, to be informed of the objectives, plans, and policies of the department. The members of these committees through acquaintance and understanding of various health programs may actively support their objectives and interpret the work of the department to their daily contacts.

GOVERNMENTAL RELATIONS

The health department is only one member in the family of local government agencies. In all families antagonism

may arise among members, and there are communities in which definite antagonism exists between the school department and health department. Similarly, there are instances in which the public health nurse, the school nurse, and the Visiting Nurse Association nurse do not integrate their activities, as a matter of fact will not pass one another on the same side of the street. These conditions are examples of poor public relations. In each community activity there should be organized regular inter-agency conferences. School health is the joint responsibility of the health and school departments. Public health nursing is the joint responsibility of all agencies employing public health nurses. After all, it is the community health program which is important and not the isolated Visiting Nurse Association, school committee, or health department program. Too often a health worker loses sight of the ultimate objectives because of jurisdictional disputes, and the efforts of all involved are ineffectual. Cordial relations must be maintained not only among the agencies of local government but with health, welfare, and social agencies at all levels of government.⁷ Nowhere can we find a better record of excellent relationship than that which exists between the Public Health Service and state health departments. Similarly, there should be established between state and local departments an equally good inter-agency relationship through joint conferences of state and local health authorities. In communities, inter-agency coördination can be best achieved through community organizations which have accepted crystallized objectives for a health program.

CONCLUSION

Public health is big business. And, while never before have people been as aware of health as they now are, we have still fallen short of creating a proper demand for the attainment and

maintenance of optimal health. Therefore, the entire health department staff must engage in a continuous program of good, well planned public relations through an inservice personnel relations program for its employees and by the crystallization of objectives known to all and implemented by specific services and responsibilities. Many media of public relations are available, but they must be attractively presented to be effective. The health department, working with all of the professions of the healing arts as well as with community leaders and various groups, must develop public opinion to demand the attainment and maintenance of optimal health.

Finally, the public must have confi-

dence in the ability and work of the health department. It must be made to feel the need of the department and the services which it offers.

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John J. Sippy Memorial Fund

Walter H. Brown, M.D., of Palo Alto, Calif., Chairman of the John J. Sippy Memorial Committee, Western Branch, American Public Health Association, recently announced the vote of the Western Branch at its recent Annual Meeting in Los Angeles to establish a John J. Sippy Memorial Fund. This was believed to be the most suitable and practical form of memorial for the late Dr. Sippy, who was Health Officer of San Joaquin County Health District for many years, and a Past President of the American Public Health Association. It is the plan of the Western Branch that the fund would be used to provide a lecture to be given at the Annual Meeting of the Western Branch, preferably by a member of the Western Branch. The lecturer and the subject will be chosen by a committee appointed annually by the President of the West-

ern Branch on the basis of some outstanding contribution in the field of public health.

According to Dr. Brown's announcement, the response to the proposal has been both spontaneous and gratifying. The Executive Committee of the Western Branch has already made an initial contribution from the limited funds of the Branch, and the past and present members of the staff of the San Joaquin Local Health District have made a substantial contribution of the funds remaining from those collected by them for a memorial plaque at the office of the District.

Dr. Brown has announced that members of the Western Branch and others who wish to contribute to this fund may do so by sending their gifts in care of Dr. Brown at 628 Guinda Street, Palo Alto, Calif.